

**INSTRUCTIONS  
FOR  
BUILDING PERMIT WORKSHEET**

1. Complete only the Applicant Section of this form and please print clearly. If you are not the property owner of record, a letter of authorization will also be required. Building Permits/Zoning Certificates must be filed for in-person. After completion, bring the Application Worksheet and all other required documents to the Permit Center, 1<sup>st</sup> Floor, Harford County Administrative Office Building, 220 South Main Street, Bel Air, Maryland.
2. If construction is being done by a Maryland Home Improvement Contractor, a copy of your signed contract along with the license number of the contractor is required at the time of application.
3. For new home construction, **two copies** of the building plans with (1) the IECC Residential Energy Efficiency Code form and (2) a copy of the proposed Residential Fire Sprinkler Plan as designed by a Certified Sprinkler Contractor are required at the time of permit application.
4. To avoid delays in applying for your permit or the need for a return trip, please call the Permit Center at 410-638-3122 and ask to speak with a Planning Assistant prior to bringing your Building Permit/Zoning Certificate Worksheet into the office. If any additional information is required at the time of your application, the Planning Assistant will let you know. It is important to bring all required documents with you.



Harford County  
Permit Center  
  
220 S. Main Street  
Bel Air, Maryland 21014  
  
410-638-3122

## BUILDING PERMIT/ZONING CERTIFICATE WORKSHEET

If this application is denied for any reason,  
only 50% of the fee will be refunded.

Worksheet must be signed by applicant.

Building Permit No.	_____
Zoning Certificate No.	_____
Grading Permit No.	_____
Owner Authorization:	yes      no

**APPLICANT: Please complete all non-shaded sections of this form printing legibly and firmly. Shaded areas will be completed by Staff.**

Street Address of Work Site: _____		Application Date: _____	
City/State/Zip Code: _____		Public: Water _____ Sewer _____	Private: Septic _____ Well _____
Permit Project Description: _____			
Permit Type:	Commercial _____	Manufactured _____	Multi-Family _____
Work Class:	Accessory _____	Addition _____	Alteration _____
	Mobile Home Install _____	New _____	Shell Building _____
			Temporary _____
			Tenant Space _____
Height of Structure: _____	Number of Stories: _____	Finished Basement: yes   no	
Condominium: yes   no	If yes: Commercial _____ or Residential _____	Construction Cost: \$ _____	
Electricity: _____	Plumbing: _____	Mechanical: _____	Fire Sprinkler: _____
On Site Utility: _____	Fuel Gas: _____	Type Heat: _____	
<b>Occupancy Classifications/Square Footage</b> (Square Footage is measured outside wall to outside wall and includes garages):			
A-1 _____	A-2 _____	A-3 _____	A-4 _____
F-1 _____	F-2 _____	H-1 _____	H-2 _____
I-1 _____	I-2 _____	I-3 _____	I-4 _____
R-3 _____	R-4 _____	S-1 _____	S-2 _____
		U _____	Built to IRC _____
			B _____
			E _____
			H-3 _____
			H-4 _____
			H-5 _____
			R-1 _____
			R-2 _____
<b>Is this Permit Application the result of an active investigation with the Department of Planning &amp; Zoning and/or the Department of Inspections, Licenses, and Permits?</b> (Circle one) <b>Yes</b> <b>No</b>			
Applicant Information ----->	Name: _____	Phone/Cell No. _____	
	Full Address: _____		
	Email: _____		
Property Owner Information ----->	Name: _____	Phone/Cell No. _____	
	Full Address: _____		
	Email: _____		
Contractor Information ----->	Company Name: _____	Business No. _____	
	Point of Contact: _____	Cell No. _____	
	Full Address: _____		
	Email: _____		
<b>Please select main Permit Point of Contact:</b> _____Applicant    _____Property Owner    _____Contractor			
(Please complete unshaded areas on the reverse side of this document, also.)			

### ZONING CERTIFICATION FOR THIS PERMIT IS APPROVED BASED ON THE SITE PLAN AND INFORMATION SUBMITTED WITH APPLICATION

I have carefully examined and read this application and the same is true and correct to the best of my knowledge and belief. In doing this work, all provisions of the Harford County Codes and laws of the State of Maryland will be complied with, whether specified or not. I will notify the Department of Inspections, Licenses, and Permits twenty-four (24) hours in advance when I am ready for inspections. No work will be concealed until approved. Consent is given for the entry of authorized inspectors until the job has received a Certificate of Occupancy.

**CAUTION: A permit will expire one (1) year from date of issue unless work is started and diligently pursued.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**If an event presents a public safety issue or violates a condition of the building permit/zoning certificate, future building permits/zoning certificates may be denied.**

## BUILDING PERMIT/ZONING CERTIFICATE WORKSHEET (continued)

**Construction Type:** Type IA \_\_\_\_\_ Type IIA \_\_\_\_\_ Type IIIA \_\_\_\_\_ Type IV \_\_\_\_\_ Type VA \_\_\_\_\_  
 (check one) Type IB \_\_\_\_\_ Type IIB \_\_\_\_\_ Type IIIB \_\_\_\_\_ Built to IRC \_\_\_\_\_ Type VB \_\_\_\_\_

**Permit Staff will complete the sections below.**

**Subdivision:** \_\_\_\_\_

MHIC No. \_\_\_\_\_ Verified \_\_\_\_\_ MHBR No. \_\_\_\_\_ Verified \_\_\_\_\_ Land Owner Affirmation \_\_\_\_\_ Verified \_\_\_\_\_

Map \_\_\_\_\_ Grid \_\_\_\_\_ Parcel \_\_\_\_\_ Lot No. \_\_\_\_\_ Section \_\_\_\_\_ Plat No. \_\_\_\_\_

Zoning Use Code \_\_\_\_\_ Type Work \_\_\_\_\_ Tax ID No. \_\_\_\_\_ Field Card No. \_\_\_\_\_

Zoning District \_\_\_\_\_ Board of Appeals Reference \_\_\_\_\_

**Plan Information**

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Plans Submitted \_\_\_\_\_

Model \_\_\_\_\_

No. of Bedrooms \_\_\_\_\_

Number Full Baths \_\_\_\_\_

Number Half Baths \_\_\_\_\_

Number Fireplaces \_\_\_\_\_

**Fee Calculation**

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<u>Width</u>	<u>X</u>	<u>Length</u>	<u>X</u>	<u>Floor</u>	<u>=</u>	<u>Sq. Feet</u>	<u>X</u>	<u>Rate</u>	<u>=</u>	<u>Fee</u>
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
_____	X	_____	X	_____	=	_____	X	_____	=	_____
<b>Total Fee</b>									=	=====

All Permit Applications shall expire 180 days from application date unless issued or diligently pursued. All applications will be routed to applicable County agencies for plan review and approval before building permit/zoning certificate is issued. County agencies must respond within ten (10) business days of application date.